

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/590135

FILING DATE

28 APR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3	2		1			
4	1		1			
5	0	3	3			
6	0	3	3			
7	0	3	3			
8	0	3	3			
9	0	3	3			
10	1		1			
11	1		1			
12	2		1			
13	1		1			
14	0	3	3			
15	0	3	3			
16	0	3	3			
17	0	3	3			
18	0	3	3			
19	1		1			
20	1		1			
21	0					
22	0					
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49						
50						
TOTAL IND.	6	↓	6	↓		↓
TOTAL DEP.	18	←	34	←		←
TOTAL CLAIMS	24		40			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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97						
98						
99						
100						
TOTAL IND.				↓		↓
TOTAL DEP.			←		←	←
TOTAL CLAIMS						